## **Application Data Sheet**

## **Application Information**

Application Type:: Regular
Subject Matter:: Utility
Suggested Group Art Unit:: N/A
CD-ROM or CD-R?:: None
Sequence submission?:: None

Computer Readable Form (CRF)?:: No

Title:: SEMICONDUCTOR DEVICE AND

METHOD FOR MAKING THE DEVICE

HAVING AN ELECTRICALLY MODULATED

**CONDUCTION CHANNEL** 

Attorney Docket Number:: 21806-00070-US1

Request for Early Publication?::

Request for Non-Publication?::

No
Total Drawing Sheets::

6
Small Entity?::

No

Petition included?:: No

Secrecy Order in Parent Appl.?:: No

## **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Eric Family Name:: Adler

City of Residence:: Jericho

State or Province of Residence:: VT

Country of Residence:: US

Street of mailing address:: 14 Kettle Creek

City of mailing address:: Jericho

State or Province of mailing address:: VT

Postal or Zip Code of mailing address:: 05465

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: James

Middle Name:: S.

Family Name:: Dunn

City of Residence:: Jericho

State or Province of Residence:: VT

Country of Residence:: US

Street of mailing address:: 75 Orr Road

City of mailing address:: Jericho

State or Province of mailing address:: VT

Postal or Zip Code of mailing address:: 05465

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Joseph

Family Name:: ladanza

City of Residence:: Hinesburg

State or Province of Residence:: VT

Country of Residence:: US

Street of mailing address:: 160 Billings Farm Road

City of mailing address:: Hinesburg

State or Province of mailing address:: VT

Postal or Zip Code of mailing address:: 05461

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Page # 2 Initial 10/31/03

Status:: Full Capacity

Given Name:: Jenifer

Middle Name:: E.

Family Name:: Lary

City of Residence:: Hinesburg

State or Province of Residence:: VT

Country of Residence:: US

Street of mailing address:: 49 CB Road

City of mailing address:: Hinesburg

State or Province of mailing address:: VT

Postal or Zip Code of mailing address:: 05461

**Correspondence Information** 

Correspondence Customer Number:: 30678

**Representative Information** 

Representative Customer Number:: 30678

**Domestic Priority Information** 

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Division of	09/467,537	12/20/99

## **Assignee Information**

Assignee name:: International Business Machines

Corporation

Street of mailing address:: Old Orchard Road

City of mailing address:: Armonk

State or Province of mailing address:: NY

Postal or Zip Code of mailing address:: 10504

Page # 3 Initial 10/31/03